

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL AVE.  
PIERRE, S.D. 57501  
(605)773-4845  
FAX (605)773-4550

**CERTIFICATE OF AMENDMENT  
OF THE  
CERTIFICATE OF LIMITED PARTNERSHIP**

**FILING FEE: \$100**

The undersigned, on behalf of the limited partnership named below, hereby certifies that:

1. The name of the limited partnership is: \_\_\_\_\_
2. The date of filing the certificate is: \_\_\_\_\_
3. The amendment to the certificate is:

Dated: \_\_\_\_\_

\_\_\_\_\_  
(General Partner)

\_\_\_\_\_  
(General Partner)

\_\_\_\_\_  
(General Partner)

A certificate of amendment must be signed by at least one general partner and by each other general partner designated in the certificate as a new general partner.

Submit one original and one copy.

domesticlpamendment July 2005